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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Mr. Berry jo McKockener		heck if addre								
	(b) Address (number and street) 9400 State Avenue, Room 111 P.0	2. Candidate's FEC Identification Number P60011608									
	(c) City, State, and ZIP Code				3. Is This	Nev	V		Amended		
	Kansas City	KS	6611	2	Statement	X (N)	OR		(A)		
4.	Party Affiliation	5. Office Soug			6. State & Distr	rict of Candidate					
	Rep	President	ial								
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)										
	Berry McKockener committee										
(b) Address (number and street) 9400 State Avenue, Room 111 P.O. B											
	(c) City, State, and ZIP Code										
	kansas city				KS	66112					
(Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.											
NOTE: This designation should be filed with the principal campaign committee.											
(a) Name of Committee (in full)											
(b) Address (number and street)											
(c) City, State, and ZIP Code											
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Si	Signature of Candidate										
M	Ir berry jo McKockener			08/21/2015							
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											

FEC FORM 2 (REV. 02/2009)